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31824	7590 02/2: T WILL & EMER RMAN AVE.	OCK 1 for any change of address) 7/2007 LY LLP MAY 2	E yas ha	Note: A certificate of mailing can only be used for domestic mailings of the ree(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  hereby certify that this Fee(s) Transmittal is being deposited with the United states Postal Service with sufficient postage for first class mail in an envelope ddressed to the Mail Stop ISSUE FEE address above, or being facsimile ransmitted to the USPTO (571) 273-2885, on the date indicated below.		
ikvine, ca 92	.012-7100	Te Te	A DEMARKS			(Depositor's name)
		10				(Signature)
			L.	· · · · · · · · · · · · · · · · · · ·		(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		TTORNEY DOCKET NO.	CONFIRMATION NO.
10/779,647	10/779,647 02/18/2004		Robert Duncan		049051-0203 8924	
TILE OF INVENTION	A. CONTO TINO DEVIC	E DEFLOTMENT USIN	IG MASS STORAGE DEV	ICE		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	EE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	05/29/2007
EXAMINER ART UNIT			CLASS-SUBCLASS			
STOYNOV, STEFAN 2116		713-001000	,			
CFR 1.363).  Change of corresp Address form PTO/S  "Fee Address" ind	condence address or indication condence address (or Cha B/122) attached. lication (or "Fee Address 02 or more recent) attack	ange of Correspondence	2. For printing on the patent front page, list  (!) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Wyse Tech	nology, Inc.		San Jose, Cal	ifornia		
Please check the appropr	riate assignee category or	categories (will not be p	rinted on the patent) :	Individual 🖾 Corp	oration or other private gro	oup entity Government
Advance Order -	No small entity discount	d above)	b. Payment of Fee(s): (Plea A check is enclosed. Payment by credit car The Director is hereby overpayment, to Depo	d. Form PTO-2038 is authorized to charge sit Account Number 5	attached. the required fee(s), any de 02203 (enclose a	ficiency, or credit any n extra copy of this form)
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						

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Authorized Signature Registration No. 39, 266 Typed or printed name Soveon (Karen) Laub

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